01/27/06 10:1	0 TEL 408 377 61	37	X1linx	<u>Lega</u> l			2 001	
	OIPE	PART B -	FEE(S) T	TRANSMITTAL				
Complete and send thi	U 4.\		(s), to: <u>M</u> z	Mail Stop ISS Commissione P.O. Box 145 Alexandria, V	r for Patents 0 /irginia 22313–1	450		
\ <u>#</u>	4/		or <u>F</u> s	ax (571) 273-288	remired) Blocks 1	through 5 sl	ould be completed	whe
INSTRUCTIONS: This folding properties. All further corrected be maintenance fee notifications	should be used for trans- spondence including the Pa low or directed otherwise i	mitting the ISSUE stent, advance orda in Block 1, by (a) s	ree and rotifi specifying u	ication of maintenance for new correspondence add	es will be mailed to tress; and/or (b) indi-	cating a sepa	correspondence add rate "FEE ADDRES	ress s Sy" (i
CURRENT CORRESPONDENCE 24309 759	ADDRESS (None: Use Block I for an	ny change of address)	-		te of mailing can only. I. This certificate can itional paper, such as ficate of mailing of the control of the			
XILINX, INC ATTN: LEGAL DE 2100 LOGIC DR				I hereby certify to States Postal Ser- addressed to the transmitted to the	Certificate of Mail gat this Fee(s) Transs rice with sufficient p Mail Stop ISSUE USPTO (571) 273-2	ing or Trans mittal is bein ostage for fir FPE address 2885, on the c	mission g deposited with the st class mail in an e above, or being fi late indicated below.	Unit nvelu csim
SAN JOSE, CA 951	.24				e Matthew		/ (Deposito	rian 2
30/2006 MAHHED2 00000 C:1501 1400.00		i3		Janı	uary 27, 2	006 mi	M out	lgnatus (Dar
		E	IRST NAMED	LINVENTOR	ATTORNEY D	OCKET NO.	CONFIRMATION	NO.
APPLICATION NO. 10/717,343	FILING DATE 11/18/2003		Schuvicz E.		X-1414		R186 ·	
	ECONFIGURABLE SRAM-		Б	PLIBLICATION FRE	TOTAL FR	E(S) DUB	DATE DUB	
APPLN. TYPE	SMALL ENTITY	ISSUE FE		PUBLICATION FEE	TOTAL FRI		DATE DUS 02/07/2006	
		135UE FRI \$1400		\$0	TOTAL FEI		L	
APPLN. TYPE nonprovisional EXAM	SMALL ENTITY NO INER	ISSUE FEI \$1400 ART UNI		\$0 CLASS-SUBCLASS			L	
APPLN. TYPE nonprovisional EXAM TAN, V	SMALL ENTITY NO INER	15SUE FRI \$1400 ART UNI 2819	т	\$0 CLASS-SUBCLASS 365-189110	\$14		L	
APPLN, TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Clange of correspond Address form PTO/SB/12	SMALL ENTITY NO INFR /IBOL c address or indication of "Feence address (or Change of 02) attached.	1\$SUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence	2. Por prin (1) the nar or agents (2) the par	\$0 CLASS-SUBCLASS 365-189110 thing on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (having	age, list I putent attorneys us a member a	00	02/07/2006 ir J. Behi	
APPLN. TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12	SMALL ENTITY NO INER //BOL c address or indication of "Fee	1SSUE FEI \$1400 ART UNF 2819 Address' (37 Correspondence	2. Por prin (1) the nar or agents C (2) the nar registered 2 registers	\$0 CLASS-SUBCLASS 365-189110 thing on the parent front p mes of up to 3 registered OR, alternatively,	age, list I putent attorneys us a member a	and Arthu	02/07/2006 ir J. Behi	
APPLN. TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Change of correspond Address from PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND	SMALL ENTITY NO INER /IBOL address or indication of "Federics address (or Change of (2) attached. ion (or "Pec Address" Indicator more recent) attached. Use RESIDENCE DATA TO B	1\$SUE FEI \$1400 ART UNI 2819 So Address" (37 Correspondence ation form a of a Customer	2. Por prin (1) the nay or agents 0 (2) the nay registered 2 registered 2 registered isted, no r	CLASS-SUBCLASS 365-189110 Thing on the parent front position of up to 3 registered OR, alternatively, me of a single firm (havin amoney or agent) and the parent allomeys or agename will be printed.	age, list I putent attorneys us a member a se names of up to nus. If no name is	1 Arthu 2 Justi	02/07/2006 ir J. Behi	.el
APPLN. TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Change of correspond Address from PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND	SMALL ENTITY NO INER /IBOL c address or indication of "Federics address (or Change of (22) attached. ion (or "Fee Address" Indicator more recent) attached. Use RESIDENCE DATA TO B an assignee is identified be 137 CFR 3.11. Completion	1SSUE FEI \$1400 ART UNF 2819 Address" (37 Correspondence ation form of a Customer E PRINTED ON To	2. Por prin (1) the nar or agents 0 (2) the nar registered 2 registere listed, nor HE PATENT data will app 1 a substitute	CLASS-SUBCLASS 365-189110 Thing on the parent front position of up to 3 registered OR, alternatively, me of a single firm (havin amoney or agent) and the parent allomeys or agename will be printed.	age, list putent attorneys ng us a member a to names of up to atts. If no name is assignce is identified	1 Arthu 2 Justi	02/07/2006 ir J. Behi	el
APPLN. TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI XILINX, I	SMALL ENTITY NO INER //BOL c address or indication of "Federics address (or Change of (22) attached ion (or "Fee Address" Indicator more recent) attached. Use RESIDENCE DATA TO Be an assigned is identified be a 37 CFR 3.11. Completion of EE	SSUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence ation form of a Customer of a Customer E PRINTED ON To slow, no assignce of of this form is NOT (B)	2. Por prim (1) the nar or agents (2) the nar registered 2 registered isted, nor HE PATENT data will app (a substitute) RESIDENC e, San	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin anomey or agen) and the st parent attorneys or age name will be printed. If (print or type) their on the patent, If an for filing an assignment. CE: (CITY and STATE O	age, list I putent attorneys age us a member a to names of up to ass. If no name is assignce is identified R COUNTRY)	1 Arthu 2 Justi 3	02/07/2006 ir J. Behi in Liu document has been	.el
APPLN. TYPE nonprovisional EXAMI TAN, V 1. Change of correspondence CFR 1,363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNE	SMALL ENTITY NO INER //BOL c address or indication of "Federics address (or Change of (22) attached ion (or "Fee Address" Indicator more recent) attached. Use RESIDENCE DATA TO Be an assigned is identified be a 37 CFR 3.11. Completion of EE	SSUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence ation form of a Customer of a Customer E PRINTED ON To slow, no assignce of of this form is NOT (B)	2. Por prim (1) the nar or agents (2) the nar registered 2 registered isted, nor HE PATENT data will app (a substitute) RESIDENC e, San	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin anomey or agen) and the st parent attorneys or age name will be printed. If (print or type) their on the patent, If an for filing an assignment. CE: (CITY and STATE O	age, list I putent attorneys age us a member a to names of up to ass. If no name is assignce is identified R COUNTRY)	1 Arthu 2 Justi 3	02/07/2006 ir J. Behi in Liu document has been	.el
APPLN. TYPE nonprovisional EXAM TAN. V 1. Change of correspondence CFR 1.363). Change of correspond Address from PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI XILINX, I Please check the appropriate 4a. The following fee(s) are	SMALL ENTITY NO INFR /IBOL c address or indicution of "Federic address (or Change of 622) attached. ion (or "Fee Address" Indicator more recent) attached. Use a significance is identified be a 37 CFR 3.11. Cumpletion of EE NC., 2100 Lo	SISUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence ation form a of a Customer E PRINTED ON Toology, no assignee of this form is NOT (B) Ogic Drive ories (will not be printed)	2. Por prim (1) the nar or agents C (2) the nar registered 2 registered isted, no r HE PATENT data will app 1 a substitute) RESIDENC e, San inted on the p	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin amorney or agent) and the ed patent altorneys or age name will be printed. I (print or type) lear on the patent, If an for filing an assignment. CE: (CITY and STATE Of patent): Individual For(s):	sqe, list I patent attorneys age a member a to names of up to ass. If no name is assignce is identified R COUNTRY) 5124 Corporation or o	1 Arthu 2 Justi 3	02/07/2006 ir J. Behi in Liu document has been	.el
APPLN. TYPE nonprovisional EXAM TAN. V 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI XILINX, I Please check the appropriate 4a. The following [se(s) are	SMALL ENTITY NO INER /IBOL address or indication of "Federice address (or Change of 62) attached from (or "Fee Address" Indication (or "Fee Address" Indication more recent) attached. Use RESIDENCE DATA TO B an assignce is identified be 137 CFR 3.11. Completion of EE NC., 2100 Local assignce category or caregory and caregory	1SSUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence ation form of a Customer E PRINTED ON To slow, no assignce of of this form is NOT (B) Ogic Drive ories (will not be pri	2. Por prim (1) the nar or agents C (2) the nar registered 2 registered 2 registered isted, no r HE PATENT data will app 1 a substitute) RESIDENC e, San inted on the p . Payment of	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin arrorney or agent) and the ed patent attorneys or age name will be printed. I (print or type) The filing an assignment. The (CITY and STATE Of the Jose, CA 9 patent): Individual Foc(s): in the amount of the foc(age, list I patent attorneys age a member a to names of up to assignce is identified R COUNTRY) 5124 Corporation or o	1 Arthu 2 Justi 3	02/07/2006 ir J. Behi in Liu document has been	.el
APPLN. TYPE nonprovisional EXAM TAN. V 1. Change of correspondence CFR 1.363). Change of correspond Address from PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI XILINX, I Please check the appropriate 4a. The following [se(s) are	SMALL ENTITY NO INFR /IBOL c address or indication of "Federic address (or Change of 622) attached. Use or more recent) attached. Use or more recent) attached. Use or more recent) attached. Use of the federic attached at a signification of the federic assignee is identified be a significant of the federic assignee category or carego enclosed: small entity discount permitter.	ISSUE FEI \$1400 ART UNI 2819 Address" (37 Correspondence ation form a of a Customer E PRINTED ON Tools form is NOT (B) Ogic Drive ories (will not be printed)	2. Por prin (1) the nar or agents C (2) the nar registered 2 registered 2 registered isted, no r HE PATENT data will app I a substitute) RESIDENC e, San inted on the p Payment of A check Payment	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin arroncy or agent) and the deparent altorneys or agename will be printed. I (print ur type) The carron the patent, If an for filing an assignment. The Jose, CA 9 Destent: Individual Free(s): in the amount of the fee(age, list I putent attorneys age a member a to names of up to assignce is identified R COUNTRY) 5124 Corporation or o s) is enclosed. 0-2038 is attached.	1 Arthu 2 Justi 3 d below, the	02/07/2006 IT J. Behi In Liu document has been	filed
APPLN. TYPE nonprovisional EXAM TAN, V 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address' indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI XILINX, I Please check the appropriate 4a. The following fee(s) are I issue Fee Publication Fee (No s Advance Order - # of	SMALL ENTITY NO INER /IBOL c address or indication of "Federic address (or Change of (2) attached. Use or more recent) attached. Use resident more recent) attached. Use RESIDENCE DATA TO B an assignce is identified be 37 CFR 3.11. Completion of the completion	SSUE FEI \$1400 ART UNI 2819 So Address" (37 Correspondence ation form a of a Customer E PRINTED ON To slow, no assignee of this form is NOT (B) Ogic Drive ories (will not be pri 4b. cd)	2. For prin (1) the nar or agents (2) the nar registered 2 registered isted, no r HE PATENT data will app f a substitute) RESIDENC e, San inted on the p Payment of A check Payment The Directory Deposit Acc	CLASS-SUBCLASS 365-189110 Iting on the parent front p mes of up to 3 registered OR, alternatively, me of a single firm (havin arrorney or agent) and the ed patent attorneys or age name will be printed. I (print or type) The filing an assignment. The (CITY and STATE Of the Jose, CA 9 patent): Individual Foc(s): in the amount of the foc(age, list I putent attorneys age as a member a to names of up to assignce is identified R COUNTRY) 5124 Corporation or o to is enclosed 0-2038 is anached they charge the requirements	1 Arthu 2 Justi 3 d below, the	o2/07/2006 in J. Behi in Liu document has been croup entity Gon or credit any overpay copy of thus form).	filed

January 27, Authorized Signatury Registration No. 51,959 Justin Liu Typed or printed name

2006

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.41 This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

MAIL STOP ISSUE FEE COMMISSIONER FOR PATENTS P. O. Box 1450 Alexandria, Virginia 22313-1450

Inventor(s):

Schuyler E. Shimanek et al.

Assignee: XILINX, INC.

Serial No.: 10/717,343

Filed:

November 18, 2003

Title: Reconfigurable SRAM-ROM Cell

Docket No.: X-1414 US

Enclosed: Return Receipt Postcard

Part B. - Fee Transmittal

Date: January 27, 2006

Arty/Sec: JL/jam

conf.no. 8186

VIA FACSIMILE 571-273-2885